

# REQUEST FOR APPLICATIONS



## RFA # A263

<b>Funding Agency</b>	North Carolina Department of Health and Human Services Division of Public Health Women's and Children's Health Section Women's Health Branch Family Planning and Reproductive Health Unit
<b>Issue Date</b>	August 29, 2012 (targeted counties) October 1, 2012 (non-targeted counties)

**Applications will be received until 5:00 p.m. on November 27, 2012.**

Applications may be delivered to either the mailing address or the street/hand delivery address:

**Mailing Address:**

Teen Pregnancy Prevention Initiatives  
NCDHHS – Division of Public Health  
1929 Mail Service Center  
Raleigh, NC 27699-1929

**Delivery Address (i.e., Fed EX, UPS, DHL):**

Teen Pregnancy Prevention Initiatives  
NCDHHS – Division of Public Health  
5601 Six Forks Road  
Raleigh, NC 27609

**Inquiries**

Inquires about this RFA are encouraged and may be directed to the following Teen Pregnancy Prevention Initiatives staff at [SVC\\_DHHS.tppi-rfa@dhhs.nc.gov](mailto:SVC_DHHS.tppi-rfa@dhhs.nc.gov) or (919)707-5700.

- Sydney Atkinson, Family Planning & Reproductive Health Unit Supervisor
- Cynthia Seale-Rivera, Program Consultant
- Valerie Meadows Sims, Program Consultant
- Audrey Loper, Evaluation Consultant

More information about the Teen Pregnancy Prevention Initiatives can be found at [www.teenpregnancy.ncdhhs.gov](http://www.teenpregnancy.ncdhhs.gov)

## Introduction

The Adolescent Parenting Program (APP) is a secondary prevention program (i.e., prevention of second or higher order pregnancies) that provides four-year annually renewable grant awards to projects to provide services for pregnant or parenting teens throughout North Carolina. APP is administered by Teen Pregnancy Prevention Initiatives (TPPI) of the North Carolina Department of Health and Human Services, Division of Public Health, Women's and Children's Health Section, Women's Health Branch, Family Planning and Reproductive Health Unit.

The goals of APP are as follows:

1. Increase the self sufficiency outcomes for APP participants by:
  - a. Increasing the delay of a subsequent pregnancy;
  - b. Increasing graduation from high school with diploma or completion of GED;
  - c. Increasing successful transition to adulthood including enrollment in post-secondary education, vocational training, or employment at a livable wage, and living in safe and stable housing after graduation from APP.
2. Improve developmental outcomes for the children of APP participants by:
  - a. Increasing healthy births;
  - b. Increasing incidence of appropriate discipline, nurturing behavior, and children who are well cared for;
  - c. Increasing age-appropriate physical, emotional, cognitive, and social development, including readiness for school success.

Up to five public or private non-profit agencies (e.g., schools, local health departments, non-profit community-based organizations) will receive funding to implement APP in communities throughout the state of North Carolina.

Applications are desired from counties ranking in the top quartile (i.e., the top 25) for pregnancy rates among females aged 15 to 19 based on a five year average between 2006-2010 (referred to as "targeted counties"). The targeted counties are as follows: Vance, Richmond, Robeson, Onslow, Lee, Scotland, Edgecombe, Hertford, Halifax, Montgomery, Bertie, Lenoir, Craven, Wilson, Duplin, Northampton, Anson, Hoke, Wayne, Cumberland, Columbus, Sampson, Martin, Beaufort and Washington. In accordance with the TPPI Legislative Rules (see Appendix B), interested agencies in these counties shall receive the request for applications (RFA) 30 days prior to agencies in other counties and be eligible for additional consultation during this period of time. Applicants in these counties shall also receive a demonstrated need score as described below.

## Background

The General Assembly of North Carolina requires the North Carolina Department of Health and Human Services to establish and administer programs to prevent teen pregnancy through Teen Pregnancy Prevention Initiatives (see the TPPI Legislative Rules in Appendix B).

## Scope of Services

Applicants shall replicate the APP model as prescribed by Teen Pregnancy Prevention Initiatives. The program, which is coordinated by at least one full-time staff person with a caseload of between 15 and 25 participants, includes intensive case management, home visiting, and group educational sessions. Grantees serving more than 20 participants must either employ a program assistant for at least 10 hours per week or indicate an equivalent in-kind contribution of time by program volunteers or interns to the program operations. For more information on the APP model, please see the APP logic model in the Application Form in Appendix A of this RFA. In addition, applicants are mandated to provide comprehensive sexuality education including complete and medically accurate information about contraceptive methods including abstinence to all participants.

The grant award is \$60,000 annually, and grantees are required to supplement the grant award with a minimum of \$14,000 in local matching funds or in-kind services. See the TPPI Legislative Rules in Appendix B for more information about funding levels. Local matching funds may be accounted for in either cash or in-kind services. Contracts are awarded annually for a maximum of four years contingent upon contract compliance, project performance, and availability of funding. The initial contract will begin between June 1, 2013-October 1, 2013.

## Who May Apply

Public or private non-profit agencies interested in increasing the self-sufficiency of first-time teen parents and improving the developmental outcomes of their children are eligible to apply. For-profit agencies need not apply. Potential applicants should consider whether their agency has the capacity to administer the state grant funds if awarded. Recipients of state funds are expected to have established in writing certain general agency policies including personnel and financial accounting policies. Applicants that have not previously received or successfully administered state funds should consult a TPPI staff member to determine if their agency has the internal policies and procedures in place to administer a state grant at this time. Funds to grantees will be dispersed on a cost reimbursement basis only and agencies should carefully consider if they have the capacity to implement the program under this system.

## Demonstrated Need Score

Applications from counties ranking in the top quartile (i.e., the top 25) for pregnancy rates among females aged 15 to 19 based on a five year average between 2006-2010 (referred to as “targeted counties”) shall receive a demonstrated need score as indicated on the table below.\* Points are awarded for both rank and absence of an APP in the county. The demonstrated need score shall be added to the application score established by the objective review committee.

Rank	County	5-yr Rate	Rank Points	Existing APP	Points if No APP	Total Points
1	Vance	101.1	5	Yes	0	5
2	Richmond	99	5	Yes	0	5
3	Robeson	94	5	Yes	0	5
4	Onslow	92.4	5	Yes	0	5
5	Lee	89.1	5	Yes	0	5
6	Scotland	86.8	4	Yes	0	4
7	Edgecombe	84.5	4	Yes	0	4
8	Hertford	84.1	4	Yes	0	4
9	Halifax	82.2	4	No	4	8
10	Montgomery	81.3	4	No	4	8
11	Bertie	81.1	3	Yes	0	3
12	Lenoir	80.8	3	No	3	6
13	Craven	80.2	3	No	3	6
14	Wilson	79.7	3	No	3	6
15	Duplin	79.6	3	No	3	6
16	Northampton	78.5	2	No	2	4
17	Anson	77.4	2	Yes	0	2
18	Hoke	77.4	2	No	2	4
19	Wayne	76.7	2	No	2	4
20	Cumberland	76.5	2	No	2	4
21	Columbus	76.4	1	No	1	2
22	Sampson	76	1	No	1	2
23	Martin	75.8	1	No	1	2
24	Beaufort	75.4	1	No	1	2
25	Washington	75.3	1	Yes	0	1

## Performance Score (Re-Application by Current or Former Grantees)

Agencies that have received TPPI funding within the past five years shall receive a performance rating based on their previous program performance and compliance during the last four years that they received funding. The TPPI staff will evaluate performance and compliance by reviewing site visit reports, database reports, expenditure reports, program evaluation data, report submission logs, and other documentation.

\* Although Tyrrell and Graham County's 5-year teen pregnancy rates fall into the top quartile, these rates are based on fewer than 20 occurrences per year. The State Center for Health Statistics considers these rates unstable; as a result these counties have been omitted from the top quartile.

The performance rating shall range from negative ten (- 10) points to positive ten (+ 10) points, which shall be added to the application score established by the objective review committee. Grantees that have consistently remained in compliance with all of the objectives and mandates of their contract are likely to gain points. Conversely, agencies that have experienced significant and persistent challenges in meeting any of the objectives or mandates of their contract are likely to lose points.

## GENERAL INFORMATION ON SUBMITTING APPLICATIONS

### 1. Award or Rejection

All qualified applications will be evaluated and award made to that agency whose combination of budget and service capabilities are deemed to be in the best interest of the funding agency. The funding agency reserves the unqualified right to reject any or all offers if determined to be in its best interest. Successful applicants will be notified by January 31, 2013.

### 2. Notice of Decline to Offer

Any agency that receives a copy of the RFA but declines to make an offer is requested to register its decline to offer at the following link: <http://www.zoomerang.com/Survey/WEB22FUJNCWUF4> no later than 5:00 p.m. on October 29, 2012. Confirmation of receipt will be provided in response.

### 3. Cost of Application Preparation

Any cost incurred by an agency in preparing or submitting an application is the agency's sole responsibility; the funding agency will not reimburse any agency for any pre-award costs incurred.

### 4. Elaborate Applications

Elaborate applications in the form of brochures or other presentations beyond that necessary to present a complete and effective application are not desired.

### 5. Oral Explanations

The funding agency will not be bound by oral explanations or instructions given at any time during the competitive process or after awarding the grant.

### 6. Reference to Other Data

Only information that is received in response to this RFA will be evaluated; reference to information previously submitted will not suffice.

### 7. Titles

Titles and headings in this RFA and any subsequent RFA are for convenience only and shall have no binding force or effect.

### 8. Form of Application

Applications must be submitted using the forms provided by the funding agency. Both the *Application Form* and *Budget and Justification Form* will be sent to interested agencies along with this RFA, and they can be downloaded on October 1, 2012 from the TPPI website at [www.teenpregnancy.ncdhhs.gov/funding.htm](http://www.teenpregnancy.ncdhhs.gov/funding.htm).

### 9. Original Application

The original application must contain any original documents, and all signatures in the original application must be original. Mechanical, copied, or stamped signatures are not acceptable. The original application should be clearly marked "original" on the application face sheet.

### 10. Copies of Application

Along with the original application, submit three photocopies of the application in its entirety. Copies of the application should be clearly marked "copy" on the application face sheet.

## **11. Format**

The application must be typed, single-side on 8.5" x 11" paper with margins of 1". Line spacing should be single-spaced. The font type should be easy to read and no smaller than 11-point font.

## **12. Space Allowance**

Page limits are clearly marked in each section of the application. One point will be deducted from the score of each section in which the page limit is exceeded.

## **13. Disbursement of Funds**

Funds to grantees will be dispersed on a cost reimbursement basis only. The grant recipient will be required to submit monthly invoices of expenses and supporting documentation within 10 days from the end of the month for which it is being submitted.

## **14. Level of Funding and Local Matching Funds**

The grant award is \$60,000 annually, and grantees are required to supplement the grant award with a minimum of \$14,000 in local matching funds or in-kind services. See the TPPI Legislative Rules in Appendix B for more information about funding levels. Local matching funds may be accounted for in either cash or in-kind services.

## **15. Compliance**

Funding is contingent upon compliance with the TPPI legislative rules and with all procedures and regulations prescribed by the State of North Carolina. Compliance is monitored by TPPI staff through annual site visits, monthly progress reports, and monthly expenditure reports.

## **16. Exceptions**

All applications are subject to the terms and conditions outlined herein. All responses will be controlled by such terms and conditions. The attachment of other terms and conditions by any agency may be grounds for rejection of that agency's or agency's application. Grantees and agencies specifically agree to the conditions set forth in the Performance Agreement (contract).

## **17. Advertising**

In submitting an application, an agency agrees not to use the results there from or as part of any news release or commercial advertising without prior written approval of the funding agency.

## **18. Right to Submitted Material**

All responses, inquiries or correspondence relating to or in reference to the RFA and all other reports, charts, displays, schedules, exhibits and other documentation submitted by the agency will become the property of the funding agency when received.

## **19. Competitive Offer**

Pursuant to the provision of G.S. 143-54 and under penalty of perjury, the signer of any application submitted in response to this RFA thereby certifies that this application has not been arrived at collusively or otherwise in violation of either Federal or North Carolina antitrust laws.

## **20. Agency's or Agency's Representative**

Each agency shall submit with its application the name, address and telephone number of the person(s) with authority to bind the agency and answer questions or provide clarification concerning the application.

## **21. Subcontracting**

Applicants may propose to subcontract the direct program services to another agency provided that the subcontracting relationship will enable the applicant to provide substantial additional resources and support to the subcontracted agency. Applicants that wish to subcontract direct program services to another agency must consult TPPI staff about the specific circumstances of the subcontracting relationship prior to submitting an application. A memorandum of agreement (MOA) between the applicant and the subcontracted agency must

be included in Attachment A of the application. The MOA should clearly indicate the scope of the work to be subcontracted.

## **22. Proprietary Information**

Trade secrets or similar proprietary data which the agency does not wish disclosed to other than personnel involved in the evaluation will be kept confidential to the extent permitted by NCAC TO1: 05B.1501 and G.S. 132-1.3 if identified as follows: Each page shall be identified in boldface at the top and bottom as "CONFIDENTIAL." Any section of the application that is to remain confidential shall also be so marked in boldface on the title page of that section.

## **23. Participation Encouraged**

Pursuant to Article 3 and 3C, Chapter 143 of the North Carolina General Statutes and Executive Order No. 77, the funding agency invites and encourages participation in this RFA by businesses owned by minorities, women and the disabled including utilization as subcontractor(s) to perform functions under this Request for Applications.

# **THE APPLICATION PROCUREMENT PROCESS & APPLICATION REVIEW**

The following is a general description of the process by which applicants will be selected for funding for this project:

## **1. Announcement of the Request for Applications (RFA)**

The announcement of the RFA and instructions for registering for the mandatory web-based technical assistance conference are being sent to prospective agencies and organizations via email and will be posted at the following website on October 1, 2012:

<http://www.ncdhhs.gov/grantopportunities/currentopportunities.htm>

## **2. Distribution of the RFA**

RFAs will be sent via e-mail to agencies in targeted counties that register for the web-based technical assistance conference on or after August 29, 2012 and to agencies in all other counties on or after October 1, 2012.

## **3. Provision of Application Consultation**

Inquiries about this RFA are encouraged, and may be directed to the TPPI staff at [SVC\\_DHHS.tppi-rfa@dhhs.nc.gov](mailto:SVC_DHHS.tppi-rfa@dhhs.nc.gov) or (919)707-5700. Applicants from targeted counties may receive consultation from TPPI staff upon receipt of the RFA. Applicants from all other counties are eligible for consultation following the web-based technical assistance conference on October 15, 2012. See Appendix C for an application consultation schedule of regional opportunities for individual, face-to-face appointments with DHHS staff.

Consultation to all applicants by DHHS staff shall cease on November 9, 2012. It is also the deadline for questions pertaining to the RFA. An RFA addendum containing a summary of questions asked and answers given during the consultation period will be e-mailed to all applicants on November 16, 2012. Applicants may receive assistance from the Adolescent Pregnancy Prevention Campaign of North Carolina, [www.appcnc.org](http://www.appcnc.org), 919-226-1880, until November 16, 2012.

## **4. Mandated Web-based Technical Assistance Conference**

In order to be eligible for funding, a representative of the applicant agency must participate in a web-based technical assistance conference, which will be held on October 15, 2012 from 10:00 a.m. – 12:00 p.m. The conference will be recorded and may be viewed at any time after October 15, 2012, but before the application deadline on November 27, 2012. Participation will be verified with a password system. Instructions for accessing the web-based conference will be forwarded to all agencies that register to receive the RFA.

## **5. Notice of Intent**

Any agency that plans to submit an application shall register its intent at the following link:

<http://www.zoomerang.com/Survey/WEB22FUJNCWUF4> no later than 5:00 p.m. on October 29, 2012.

Confirmation of receipt will be provided in response. Agencies that do not register their intent by the deadline



shall not be eligible to respond to this RFA. Information requested on the registration form shall include the following:

- The legal name of the agency
- The name, title, phone number, mailing address, and email address of the person who will coordinate the application submission

## **6. Application Deadline**

Applications shall be received until 5:00 p.m. on November 27, 2012. Applicants should ensure that ample time is allowed for delivery of applications. Applications arriving after the deadline of 5 PM on 11/27/12 shall not be considered even if they are postmarked on or before the deadline. Faxed or e-mailed applications will not be accepted.

## **7. Delivery & Receipt of Application**

Applications may be delivered to either the mailing address or delivery address, which are listed on the cover page of this RFA. Applications will be logged with the date and time received by the funding agency. Applicants should ensure that ample time is allowed for delivery of applications. **Applications arriving after the deadline of 5 PM on 11/27/12 shall not be considered.**

## **8. Review of Applications**

Applications are reviewed by a multi-disciplinary committee of public and private health and human services providers who are familiar with adolescent health issues. Staff from applicant agencies may not participate as reviewers. The committee uses a standardized set of criteria based on various factors to establish a score for each application and provides recommendations for funding. The award of a grant to one agency does not mean that the other applications lacked merit, but that, all facts considered, the selected application was deemed to provide the best service to the State. At their option, the application reviewers may request additional information from any or all applicants for the purpose of clarification or to amplify the materials presented in any part of the application. However, agencies are cautioned that the reviewers are not required to request clarification; therefore, all applications should be complete and reflect the most favorable terms available from the agency.

## **9. Evaluation Criteria**

The application is worth a total of 100 points. Point values are clearly marked beside each item on the Application Form (see Appendix A). An independent committee will review the application for both content and quality of responses to each item on the application. Each reviewer will first score the responses individually without consulting one another, and will then convene a meeting, which is facilitated by a TPPI staff member, to discuss the application and reach consensus on an appropriate score for each section. Demonstrated Need Scores and Performance Scores, as described in this RFA, are added by the TPPI staff to the application score established by the review committee.

## **10. Contract**

The Division will issue a contract to the recipient of the RFA funding. Expenditures can begin immediately upon receipt of a completely signed contract.

## **11. Audit**

Please be advised that successful applicants may be required to have an audit in accordance with G.S. 143C-6-22 and G.S. 143C-6-23 as applicable to the agency's status.

## **12. Assurances**

The contract may include assurances and certifications that the successful applicant would be required to execute prior to receiving a contract, including a Letter Authorizing Signature of Contracts and a Letter Authorizing Signature for Expenditure Reports. Agencies may receive federal funds, which would require them to execute certifications regarding Non-discrimination, Drug-Free Workplace, Environmental Tobacco Smoke, Debarment, Lobbying, and Lobbying Activities. Applicants that wish to review these documents before applying for funds may request to receive copies by contacting any of the TPPI staff listed on the cover page of this RFA.

### 13. Additional Documentation to Include with Application

All applicants are required to include documentation of their tax identification number.

Those applicants which are private non-profit agencies are to include a copy of an IRS determination letter regarding the agency's 501(c) (3) tax-exempt status. (This letter normally includes the agency's tax identification number, so it would also satisfy that documentation requirement.)

In addition, those private non-profit agencies are to provide a completed, signed, and notarized page verifying continued existence of the agency's 501(c) (3) status.

### 14. Federal Certifications

Agencies or organizations receiving Federal funds would be required to execute Federal Certifications regarding Non-discrimination, Drug-Free Workplace, Environmental Tobacco Smoke, Debarment, Lobbying, and Lobbying Activities. A copy of the Federal Certifications is included in this RFA for your reference (see Appendix D). Federal Certifications should NOT be signed or returned with application.

### 15. Additional Documentation Prior to Contract Execution

Contracts require more documentation prior to contract execution. After the award announcement, agencies will be contacted about providing the following documentation:

- A completed and signed letter from the agency's Board President/Chairperson identifying individuals as authorized to sign contracts. (A reference version appears in Appendix D.)
- A completed and signed letter from the agency's Board President/Chairperson identifying individuals as authorized to sign expenditure reports. (A reference version appears in Appendix D.)
- Documentation of the agency's DUNS number. Documentation consists of a copy of communication (such as a letter or email correspondence) from Dun & Bradstreet (D&B) which indicates the agency or organization's legal name, address, and DUNS number. In lieu of a document from D&B, a copy of the agency or organization's CCR record is acceptable.

If your agency does not have a DUNS number, please use the D&B online registration (<http://fedgov.dnb.com/webform>) to receive one free of charge. (DUNS is the acronym for the Data Universal Numbering System developed and regulated by D&B.)

Contracts with private non-profit agencies require additional documentation prior to contract execution. After the award announcement, private non-profit agencies will be contacted about providing the following documentation:

- A completed, signed, and notarized statement which includes the agency's Conflict of Interest Policy. (A reference version appears in Appendix D.)
- A completed, signed, and notarized page certifying that the agency has no overdue tax debts. (A reference version appears in Appendix D)

Note: At the start of each calendar year, all agencies with current DPH contracts are required to update their contract documentation. These agencies will be contacted a few weeks prior to the due date and will be provided the necessary forms and instructions.

### 16. Registration with Secretary of State

Private non-profit applicants must also be registered with the North Carolina Secretary of State to do business in North Carolina, or be willing to complete the registrations process in conjunction with the execution of the contract documents (see [www.secretary.state.nc.us/corporations](http://www.secretary.state.nc.us/corporations)).



## 17. Application Process Summary Dates:

08/29/2012	RFA released to targeted counties; targeted counties eligible for consultation.
10/01/2012	Release RFAs to all counties; non-targeted counties not eligible for consultation until after webinar on 10/15/12.
10/15/2012	Mandated web-based technical assistance conference (10:00 a.m. – 12:00 p.m.); all counties eligible for consultation.
10/23-25/2012	Regional individual face-to-face consultation appointments.
10/29/2012	Notice of intent due.
11/09/2012	End consultation by DHHS staff; Deadline for questions pertaining to the RFA.
11/16/2012	Send Q&A addendum to applicants.
11/27/2012	Application deadline at 5 PM.
01/31/2013	Successful applicants will be notified.

## COMPLETING THE APPLICATION

### Cover Letter

A cover letter on agency letterhead must be signed by the lead administrator of the agency submitting the application. The cover letter must indicate a clear understanding of and strong commitment to replicating the Adolescent Parenting Program model.

### Application Face Sheet

This form serves as the cover page of the application. It provides important information about the applicant and the proposed project, and requires the signature of the individual authorized to sign “official documents” for the agency. Complete the application face sheet with the information requested. Name and contact information of the person best suited to answer questions about the program should be included.

Applicants must enter their Data Universal Numbering System (DUNS) number, which is developed and regulated by Dun & Bradstreet. If your agency does not have a DUNS number, please use the Dun & Bradstreet (D&B) online registration ( <http://fedgov.dnb.com/webform> ) to receive one free of charge.

## Section 1: Needs Assessment

### Level of Need

Applications from targeted counties will receive a demonstrated need score as described in this RFA. However, applications from non-targeted counties may receive strong scores for this section by convincingly describing and documenting the need for services in a specific setting or among a high risk group of individuals within the county. Appropriate data and statistics should be provided to support the statement of need. Please note that it is not sufficient to state that the potential participants are at “high risk.” Applicants must indicate the risk factors and lack of protective factors which may influence the sexual behavior of potential program participants.

### Citations

Citations for data and statistics provided in the needs assessment should be indicated using endnotes. The citation list should be included on a separate page from the needs assessment narrative and will not count against the page limit for this section. For further information on citing references using endnotes, please refer to the handout at <http://www.teenpregnancy.ncdhhs.gov/funding.htm>.

## Section 2: Program Plan

### The APP Model

Applicants must demonstrate an understanding of the APP model. More detailed information about APP can be found in the APP Logic Model in the Application Form in Appendix A of this RFA.

## Educational Resources

Applicants are required to use an educational curriculum for educational group sessions and/or home visits.

Applicants may choose to use one of the following:

1. Parents As Teachers: [www.parentsasteachers.org](http://www.parentsasteachers.org)
2. Partners for a Healthy Baby: [cpeip.fsu.edu/programArea.cfm?programAreaID=9](http://cpeip.fsu.edu/programArea.cfm?programAreaID=9)

If agency is selected, the staff implementing the program must become certified to implement curriculum with fidelity.

There are also a number of interventions shown to delay the initiation of sexual activity, improve the use of contraceptives and reduce adolescent pregnancy. These interventions are listed at: [www.teenpregnancy.ncdhhs.gov/funding.htm](http://www.teenpregnancy.ncdhhs.gov/funding.htm). This publication is provided only as a resource, and all of the curricula listed may not be appropriate for use with pregnant or parenting teens or within the structure of the APP model.

## BDI Logic Model of APP

The Application Form in Appendix A contains a BDI Logic Model of APP, which visually depicts how APP achieves its goals. It shows how the program activities will impact behavior determinants, which influence behaviors and thereby increase the self-sufficiency of APP participants and improve the developmental outcomes of their children.

Applicants must implement all of the activities listed on the APP logic model. If additional activities will be conducted, applicants must add these to the logic model in the application, and indicate how these activities will contribute to the APP goals. All additions to the logic model should be indicated in bold print.

Several opportunities are available for applicants to learn how to develop BDI Logic Models. A free online course for beginners is available at <http://psdev.etr.org/recapp/documents/logicmodelcourse/index.htm> (using Internet Explorer is recommended), and a detailed manual, *BDI Logic Models: A Useful Tool for Designing, Strengthening and Evaluating Programs to Reduce Adolescent Sexual Risk-Taking, Pregnancy, HIV and Other STDs* can be downloaded from [www.teenpregnancy.ncdhhs.gov/funding.htm](http://www.teenpregnancy.ncdhhs.gov/funding.htm). The TPPI staff is available for consultation until November 9, 2012. Applicants may receive assistance from the Adolescent Pregnancy Prevention Campaign of North Carolina, [www.appcnc.org](http://www.appcnc.org), 919-226-1880, until November 16, 2012.

## Comprehensive Sexuality Education

A comprehensive sexuality education program empowers adolescents with information they need to make healthy decisions about their emotional and physical well-being, and it explores relationships, decision-making, assertiveness, peer pressure and other topics related to health and human sexuality. Applicants are mandated to provide comprehensive sexuality education including complete and medically accurate information about contraceptive methods including abstinence to all participants (see TPPI Legislative Rules in Appendix B). The term “complete and medically accurate” means verified or supported by the weight of research conducted in compliance with accepted scientific methods; and published in peer-reviewed journals, where applicable or comprising information that leading professional organizations and agencies with relevant expertise in the field recognize as accurate, objective, and complete.

## Section 3: Data Collection

### TPPI Database

TPPI monitors the services being provided to participants by requiring grantees to enter information about program activities into the web-based TPPI Database. Training is provided to program coordinators on how to use the database.

### Participant Satisfaction Feedback

Grantees are required to create and utilize a participant satisfaction survey in order to obtain feedback that will guide continuous improvements of program implementation.

## **Section 4: Agency Ability**

### **Agency Capacity**

Applicants should consider whether their agency has the capacity to administer the state grant funds if awarded. Recipients of state funds are expected to have established in writing certain general agency policies including personnel and financial accounting policies. Applicants that have not previously received or successfully administered state funds should consult a TPPI staff member to determine if their agency has the internal policies and procedures in place to administer a state grant at this time. Funds to grantees will be dispersed on a cost reimbursement basis only and agencies should carefully consider if they have the capacity to implement the program under this system.

### **Staff Salary**

The development and ultimate success of a project can be thwarted by frequent staff turnover, which is often caused in part by salaries that are not comparable to similar professional positions in the county. Applicants are expected to propose a competitive salary.

## **Section 5: Community Involvement**

### **CAC Membership**

Applicants are required to establish a Community Advisory Council (CAC) that consists of members representing at least five community agencies other than the funded agency. These agencies shall include the local health department and some of the following community entities: The public school system, the department of social services, cooperative extension, mental health services, local corporations and businesses, media, and other local agencies that serve youth.

### **CAC Role**

The CAC shall be responsible for advising and assisting program staff to provide high quality services to participants, reviewing all educational and promotional materials developed by the program to ensure appropriateness for the community, and actively promoting and supporting the program in the community. Applicants should describe the work of the CAC in assisting with preparation of the application.

### **CAC Meetings**

The CAC shall convene at least quarterly and meeting minutes shall be taken to account for the work of the CAC.

### **Letters of Specific Commitment**

If the applicant will be relying on individuals or other agencies to implement any proposed activities or to provide any resources, letters of specific commitment from those agencies must be included. Examples of such agencies include those that will provide financial support, meeting space, transportation, access to participants or comparison group members, or services to participants beyond the scope of the applicant agency. In addition, all applications must include a letter of specific commitment from the local county health department. If the proposed program activities will be implemented in more than one county, then a letter of specific commitment must be included from all applicable health departments. If the applicant is a local health department, then no letter of specific commitment is needed from the health department. All letters of specific commitment should be placed in Attachment A.

### **Documentation of General Support**

Applications should include evidence of general support from the community. Some examples of documentation that demonstrate community support include letters of general support from citizens and community agencies and statements in newspaper articles or minutes from public hearings showing community support for the application or for services for teen parents. All documentation of general support should be placed in Attachment B.

## Section 6: Budget

### Budget and Justification Form

Applicants must complete the *Budget and Justification Form*, which requires a line item budget for each of the four years of funding and a narrative justification. The form will be sent to interested agencies along with this RFA, and it can be downloaded on October 1, 2012 from the TPPI website at [www.teenpregnancy.ncdhhs.gov/funding.htm](http://www.teenpregnancy.ncdhhs.gov/funding.htm).

### Narrative Justification for Year One Expenses

A narrative justification must be included for *every* expense listed in the year one budget. Each justification should show how the amount on the line item budget was calculated, and it should be clear how the expense relates to the project. For example, a line item expense of \$498.75 for Educational Materials might be justified as follows: "Educational Materials: A student workbook from the ABC Evidence-based Curriculum for each of the 25 program participants (25 workbooks @ \$19.95 = \$498.75)."

### Local Matching Funds

Applicants are required to provide a minimum of \$14,000 in local matching funds. See the TPPI Legislative Rules in Appendix B for more information about funding levels. Local matching funds may be accounted for in either cash or in-kind contributions. In-kind contributions are those given in goods or services rather than money (e.g., meeting space at the agency, hours worked by volunteers, refreshments donated by the community for program sessions). The use of these matching funds should also be clearly justified (e.g in-kind office space 50% of 144 square feet @ \$8.75/sq. foot).

### Equipment Costs

Expenses for any equipment to be purchased may not exceed \$2,000 per item.

### Administrative Personnel Costs

Personnel costs for any staff that will not be providing direct services to program participants may not exceed 10% of the total budget.

### Incentives

Incentives may be provided to participants in order to ensure the level of commitment that is needed to achieve the expected outcomes of the program. State funds may not be used to provide cash payments as incentives. Local matching funds must be used to provide cash incentives. State funds may be used for non-cash incentives such as gift cards, movie passes, and healthy meals. If gift cards will be provided, applicants must outline a plan to log them by serial number, maintain them in a locked storage cabinet, and obtain the signature of individuals upon receipt of the cards.

### Audits

G.S. 143C-6-23 requires every nongovernmental entity that receives State or Federal pass-through grant funds directly from a State agency to file annual reports on how those grant funds were used online at [www.NCGrants.gov](http://www.NCGrants.gov). There are 3 reporting levels which are determined by the total direct grant receipts from all State agencies in the entity's fiscal year:

Level 1: Less than \$25,000

Level 2: At least \$25,000 but less than \$500,000

Level 3: \$500,000 or more

Level 3 grantees are required to submit a "Yellow Book" Audit done by a CPA. Only Level 3 grantees may include audit expenses in the budget. Audit expenses should be prorated based on the ratio of the grant to the total pass-through funds received by the entity.

### Indirect Costs

Indirect costs are those costs incurred for common or joint objectives which cannot be readily identified but are necessary to the operations of the organization, e.g., the cost of operating and maintaining facilities, depreciation, and administrative salaries. The indirect cost rate shall not exceed 10 percent (10%) of the total direct cost. If indirect costs are requested, a current indirect cost rate letter must be included with the applicant's budget. The proper documentation for indirect cost is either a copy of the indirect cost approval letter to the contractor from the cognizant federal agency.

In situations where a non-governmental entity does not receive funds directly from a federal agency and where no federal cognizant agency is designated, an indirect cost rate may be established using criteria and cost principles outlined in the applicable federal circular. Under these conditions, a person or firm, preferably one knowledgeable of this subject should establish the rate. This person or firm should not be associated with the audit firm that conducts an audit of the entity's records. Once a rate has been established, this person or firm should certify in writing to the non-governmental entity that the rate has been established in accordance with the applicable federal circular and that the documentation should be maintained and made available to any auditor requesting such information. The entity should also provide a copy of the letter to any and all agencies with whom they contract and from whom they wish to claim reimbursement of indirect costs.

Depending upon the type of organization, the following federal circulars/regulations apply:

State, Local and Indian Tribal Governments	2 CFR Part 225& ASMB C-10
Educational Institutions	OMB Circular A-21
Hospitals	45 CFR Part 74
Private Non-Profit Organizations	2 CFR Part 230
For Profit Organizations (other than hospitals)	48 CFR Part 31

## **Attachment A: Letters of Specific Commitment & Memoranda of Agreement**

This attachment must include letters of specific commitment from each of the following agencies or individuals:

- Any agency that the applicant will be relying on to successfully implement the Adolescent Parenting Program. Examples of such agencies include those that will provide financial support, meeting space, transportation, access to participants, or services to participants beyond the scope of the applicant.
- The local county health department. If the program will be implemented in more than one county, then a letter must be included from all applicable health departments. If the applicant is the county health department, then a letter of specific commitment is not needed.
- At least five current or prospective CAC members indicating both their commitment to serve and the responsibilities they will assume as a member of the CAC.

If the applicant will subcontract the direct program services to another agency or organization, a memorandum of agreement (MOA) between the applicant agency and the subcontracted agency must be included in this attachment. Applicants that wish to subcontract direct program services to another agency must consult TPPI staff about the specific circumstances of the subcontracting relationship prior to submitting an application. The MOA should clearly indicate the scope of the work to be subcontracted.

## **Attachment B: Documentation of General Support**

This attachment should include any of the following:

- Letters of general support from citizens and community agencies
- Statements in newspaper articles or minutes from public hearings showing community support
- for the application or for services for teen parents.
- Other evidence of general support from the community

## **Attachment C: Agency Information**

This attachment must include each of the following:

- Organizational chart of the applying agency.
- List of current Board of Directors of the applying agency.
- List of current or prospective Community Advisory Council members.
- Job descriptions for all staff positions that are necessary to implement and support the project.
- 501 (c) (3) Letter (*Private Non-Profit Agencies Only*) – Not required if previously submitted to the Division of Public Health in response to the general request for documentation made to current grantees by the Contracts Office on 1/1/12.
- Notarized Conflict of Interest Policy (*Private Non-Profit Agencies Only*) – Not required if previously submitted to the Division of Public Health in response to the general request for documentation made to current grantees by the Contracts Office on 1/1/12.
- Certification of No Overdue Taxes (*Private Non-Profit Agencies Only*) – Not required if previously submitted to the Division of Public Health in response to the general request for documentation made to current grantees by the Contracts Office on 1/1/12.



## APPLICATION CHECKLIST

Please be sure that all of the items below are included in your application. Use a binder clip at the top left corner on each copy of the application. The original application should be clearly marked “original” and the three copies should be marked “copy” on the application face sheet.

- \_\_\_\_\_ Cover Letter
- \_\_\_\_\_ Complete Application Form  
Sent along with the RFA, and can be downloaded on October 1, 2012 from the TPPI website at [www.teenpregnancy.ncdhhs.gov/funding.htm](http://www.teenpregnancy.ncdhhs.gov/funding.htm).
- \_\_\_\_\_ Budget & Justification Form  
Sent along with the RFA, and can be downloaded on October 1, 2012 from the TPPI website at [www.teenpregnancy.ncdhhs.gov/funding.htm](http://www.teenpregnancy.ncdhhs.gov/funding.htm).
- \_\_\_\_\_ Attachment A: Letters of Specific Commitment and Memoranda of Agreement
- \_\_\_\_\_ Attachment B: Documentation of General Support and Letters of Support
- \_\_\_\_\_ Attachment C: Agency Information

# Appendix A

## Application Form

The form in this appendix is for reference only.

The form to be submitted was sent along with the RFA  
and can be downloaded on October 1, 2012 from the TPPI website at:

[www.teenpregnancy.ncdhhs.gov/funding.htm](http://www.teenpregnancy.ncdhhs.gov/funding.htm)

# Application Face Sheet

## RFA#

### Adolescent Parenting Program

Legal Name of Agency:	
Name of Individual with Signature Authority:	
Best contact person for follow-up questions:	
Mailing Address (include zip code+4):	
Address to which checks will be mailed:	
Street Address:	
Website Address:	
Contract Administrator: • Name: • Title:	• E-mail Address: • Telephone #: • Fax #:
Agency Status: <input type="checkbox"/> Public <input type="checkbox"/> Private Non-Profit	Federal Tax ID #:
Agency's Financial Reporting Year: select to select	DUNS #:
Amount of Funding Requested: yr 1: \$60,000 yr 2: \$60,000 yr 3: \$60,000 yr 4: \$60,000	Amount of Local Matching Contribution: yr 1:          yr 2:          yr 3:          yr 4:
Do the agency's state and/or federal expenditures exceed \$500,000 for the current fiscal year (excluding amount requested)? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Are the proposed activities an existing set of activities being supported with other funds? <input type="checkbox"/> Yes <input type="checkbox"/> No	
County(ies) to Be Served by the Project:	
Will complete and medically accurate information about contraceptive methods, including abstinence, be provided to all participants as required by the legislative rules of this program? <input type="checkbox"/> Yes <input type="checkbox"/> No	
The facts affirmed by me in this application are truthful and I warrant that the applicant is in compliance with the assurances and certifications contained in NCDHHS/DPH Assurances Certifications. I understand that the truthfulness of the facts affirmed herein and the continuing compliance with these requirements are conditions precedent to the award of a contract. The governing body of the applicant has duly authorized this document and I am authorized to represent the applicant.	
Signature of Authorized Representative:	Date

# Section 1

## Needs Assessment

**Total Point Value:**

20

**Page Limit:**

3 single-spaced (excluding citation page)

- 1-1. Provide recent data to demonstrate the need for the Adolescent Parenting Program in your service area. Include state and local statistics and cite sources. (6 points)**
- 1-2. Describe the population you are proposing to serve. (6 points)**
- 1-3. What are the specific unmet needs for APP activities of the population to be served? (6 points)**
- 1-4. Citations should be noted throughout the needs assessment using endnotes. A list of citation sources should be attached to the needs assessment as a separate page, which will not count against the page limit for this section. (2 points)**

# Section 2

## Program Plan

**Total Point Value:**

25

**Page Limit:**

4 single-spaced (excluding logic model)

- 2-1. Review the APP logic model on the following pages. If activities will be added to the basic APP model, please add these activities to the logic model. Add pages as needed. Additions to the logic model should be indicated in bold print. No activities may be deleted from the logic model.**



# Adolescent Parenting Program BDI Logic Model

- = These activities are essential for achieving the goals of APP
- \* = These essential activities are repeated in more than one section of this logic model because they apply indirectly to more than one goal
- = These activities are recommended supplementary activities but are not required

## Goal #1: Increase Self-Sufficiency Outcomes for APP Participants

Intervention Activities	Determinants	Behaviors	APP Goal
<ul style="list-style-type: none"> <li>● Provide at least three hours per year of interactive group instruction by a family planning professional to include the following: 1) sexual anatomy, sexual development, reproduction; 2) condoms and contraception including effectiveness, side effects, advantages and disadvantages, demonstration, opportunities to practice using, community resources where they can be obtained, and how to decide which method is best for them; 3) HIV/AIDS and other STIs including symptoms, risk reduction, and prevention; 4) benefits of delaying a subsequent pregnancy, potential negative consequences of a subsequent pregnancy, and importance of birth spacing; 5) information about the risks of unprotected sex and practice saying no to sex or unprotected sex; 6) practice developing and improving negotiation skills for using condoms and contraception with partners; 7) practice in relationship skills, including listening, communication, and conflict resolution</li> <li>● Provide educational resources on healthy relationships and contraceptives to all participants and their parents/guardians as follow-up to group instruction on these topics</li> <li>● Conduct at least one group outing per year to a family planning clinic to learn where it is, what it offers, how much services cost, and how to ask for services</li> <li>● Make referrals to family planning services for all participants</li> <li>* Provide at least one 60-minute one-on-one session per month (12 per year with at least 4 in the home) with each participant to reinforce knowledge and skills gained during group instruction or provide make-up instruction if absent from group instruction</li> <li>* Provide ongoing case management services guided by individualized goal plans which are reviewed and updated every six months</li> <li>* Provide opportunities during group sessions or outings for positive social interaction with other teen parents</li> <li>* Provide transportation as needed for education, childcare, and healthcare services</li> <li>* Make referrals as needed to public transportation services if available</li> <li>* Make referrals as needed to counseling and/or other support services for sexual abuse or neglect in family of origin, sexual violence, dating/domestic violence, mental health, and substance abuse</li> <li>* Provide opportunities as appropriate for the father of the baby or the participant's current partner to participate in APP activities</li> <li>* Provide at least one hour per year of interactive group instruction on awareness and prevention of dating/domestic violence and sexual violence</li> <li>○ Provide opportunities to do community service</li> </ul>	<p>Improve belief that using contraception is the right choice if having sex</p> <p>Improve skills and self-efficacy to obtain and use contraception consistently and correctly</p> <p>Improve skills and self-efficacy to say no to sex or unprotected sex and/or insist on using contraception (Improve negotiation skills)</p> <p>Increase perceived risk and consequences of becoming pregnant again before completion of high school/GED</p> <p>Improve quality relationships with adult mentors</p> <p>Increase awareness of interpersonal violence; increase self-efficacy to reduce risks and reject social norms that condone interpersonal violence</p> <p>Increase support services or resources for meeting needs and dealing with challenges; improve ability to recognize when assistance is needed; improve knowledge of how to find and access support services or resources</p>	<p>Increase correct and consistent use of condoms</p> <p>Increase correct and consistent use of contraception</p> <p>Decrease unprotected vaginal/penile sex</p> <p>Decrease frequency of sex</p>	<p><b>Goal 1A:</b> Delay a subsequent pregnancy</p>

## Goal #1: Increase Self-Sufficiency Outcomes for APP Participants

Intervention Activities	Determinants	Behaviors	APP Goal
<ul style="list-style-type: none"> <li>• Provide at least two hours per year of interactive group instruction to include the following: 1) benefits of high school graduation/GED; 2) structured discussions with other teen parents who have faced similar barriers and graduated from high school/earned a GED; 3) study skills (note-taking, test-taking, etc.); 4) practice with goal setting and planning related to school and career; 5) how to develop relationships with school staff to learn about tutoring and ask for help to meet educational requirements when needed</li> <li>• Conduct meetings between APP staff and school staff at the beginning of each school year to advocate for access to quality education for APP participants, discuss the laws that protect educational rights of pregnant and parenting teens, and communicate the need for support of the APP participants in their goals for post-secondary education</li> <li>• Advise parent/guardian of APP participant as appropriate and needed on how to communicate with the school to advocate for their teen</li> <li>* Make referrals as needed to academic support services</li> <li>* Provide at least one 60-minute one-on-one session per month (12 per year with at least 4 in the home) with each participant to reinforce knowledge and skills gained during group instruction or provide make-up instruction if absent from group instruction</li> <li>* Provide ongoing case management services guided by individualized goal plans which are reviewed and updated every six months</li> <li>* Opportunities during group sessions or outings for positive social interaction with other teen parents</li> <li>* Provide transportation as needed for education, childcare, and healthcare services</li> <li>* Make referrals as needed to public transportation services if available</li> <li>* Make referrals as needed to child care assistance programs or quality child care facilities</li> <li>* Make referrals as needed to counseling and/or other support services for sexual abuse or neglect in family of origin, sexual violence, dating/domestic violence, mental health, and substance abuse</li> <li>* Provide opportunities as appropriate for the father of the baby or the participant's current partner to participate in APP activities</li> <li>* Provide at least one hour per year of interactive group instruction on awareness and prevention of dating/domestic violence and sexual violence</li> <li>o Provide opportunities to do community service</li> </ul>	<p>Improve connection to school</p> <p>Improve awareness of benefits of completing high school/GED and belief that educational programs benefit long-term goals</p> <p>Improve self-efficacy to graduate from high school or completing a GED</p> <p>Improve effective study skills</p> <p>Improve quality relationships with adult mentors</p> <p>Increase awareness of interpersonal violence; increase self-efficacy to reduce risks and reject social norms that condone interpersonal violence</p> <p>Increase support services or resources for meeting needs and dealing with challenges; improve ability to recognize when assistance is needed; improve knowledge of how to find and access support services or resources</p>	<p>Increase school attendance and progression toward school completion</p>	<p><b>Goal 1B:</b></p> <p>Increase graduation from high school with diploma or completion of GED</p>

## Goal #1: Increase Self-Sufficiency Outcomes for APP Participants

Intervention Activities	Determinants	Behaviors	APP Goal
<ul style="list-style-type: none"> <li>• Provide at least four hours per year of interactive group instruction to include the following: 1) benefits of post-secondary education, vocational training, and employment at a livable wage; 2) learning about various careers and salaries; 3) structured discussions with other teen parents who have faced similar barriers and graduated from post-secondary education or vocational training program; 4) high school counselors or college admission counselors to explain the process of enrollment in post-secondary education, vocational program, and/or job training programs; 5) bank representatives or financial planners to explain how to initiate and maintain financial services; 6) opportunities to learn about and practice financial planning skills including how to budget and pay bills; 7) learning about and practicing job readiness skills including writing resumes, cover letters, thank you notes, techniques in finding jobs, interview skills, and the importance of maintaining a job; 8) local housing authority representative to explain the process of enrollment in supportive housing programs</li> <li>• Conduct one group enrichment activity per year to a university, college, or vocational school</li> <li>• Arrange a connection to a financial aid resource and help with completion of paperwork</li> <li>• Provide opportunities to learn about and practice job readiness skills</li> <li>• Establish connections as needed to financial aid resources and provide help completing financial aid paperwork</li> <li>* Make referrals as needed to academic support services</li> <li>* Provide at least one 60-minute one-on-one session per month (12 per year with at least 4 in the home) with each participant to reinforce knowledge and skills gained during group instruction or provide make-up instruction if absent from group instruction</li> <li>* Provide ongoing case management services guided by individualized goal plans which are reviewed and updated every six months</li> <li>* Provide opportunities during group sessions or outings for positive social interaction with other teen parents</li> <li>* Provide transportation as needed for education, childcare, and healthcare services</li> <li>* Make referrals as needed to public transportation services if available</li> <li>* Provide referrals as needed to child care assistance programs or quality child care facilities</li> <li>* Provide referrals as needed to transitional or subsidized housing, and other housing supports</li> <li>* Provide referrals as needed to counseling and/or other support services for sexual abuse or neglect in family of origin, sexual violence, dating/domestic violence, mental health, and substance abuse</li> <li>* Provide opportunities as appropriate for the father of the baby or the participant's current partner to participate in APP activities</li> <li>* Provide at least one hour per year of interactive group instruction on awareness and prevention of dating/domestic violence and sexual violence               <ul style="list-style-type: none"> <li>○ Provide opportunities to develop leadership skills</li> <li>○ Provide a resource guide for services and resources in the county</li> <li>○ Provide opportunities to do community service</li> </ul> </li> </ul>	<p>Improve awareness of benefits of completing post-secondary education / training and being employed at a livable wage</p> <p>Increase knowledge, skills, and self-efficacy to complete post-secondary education, gain employment at a livable wage, and secure stable housing</p> <p>Improve financial knowledge, responsibility, and self-efficacy to manage a personal budget</p> <p>Improve quality relationships with adult mentors</p> <p>Increase awareness of interpersonal violence; increase self-efficacy to reduce risks and reject social norms that condone interpersonal violence</p> <p>Increase support services or resources for meeting needs and dealing with challenges; improve ability to recognize when assistance is needed; improve knowledge of how to find and access support services or resources</p>	<p>Increase teen parent involvement in planning and preparing for post-high school education and training or employment</p> <p>Create and access safety net of family, community, and professional resources</p> <p>Increase number of APP participants living in safe and stable environments, including supportive housing</p>	<p><b>Goal 1C:</b> Increase successful transition to adulthood including enrollment in post-secondary education, vocational training, or employment at a livable wage, and living in safe and stable housing after graduation from APP</p>

## Goal #2: Improve Developmental Outcomes for Children of APP Participants

Intervention Activities	Determinants	Behaviors	APP Goal
<ul style="list-style-type: none"> <li>• Provide at least two hours of interactive group instruction to include the following: 1) importance of prenatal care and possible solutions to barriers; 2) importance of nutrition and an exercise routine to a healthy pregnancy; 3) how to plan healthy meals; 4) benefits of delaying a subsequent pregnancy, potential negative consequences of a subsequent pregnancy, and importance of birth spacing (repeated from goal #1a); 5) the importance of going to an Ob/Gyn and learning about the services that are available; 6) the importance of avoiding alcohol, tobacco, and other drugs</li> <li>• Conduct at least one group outing per year to a doctor's office, hospital, or clinic to learn where they are, what they offer, how much services cost, and how to ask for services</li> <li>• Establish a partnership between APP and a child birth education provider to provide these services to pregnant participants</li> <li>* Provide at least one 60-minute one-on-one session per month (12 per year with at least 4 in the home) with each participant to reinforce knowledge and skills gained during group instruction or provide make-up instruction if absent from group instruction</li> <li>* Provide ongoing case management services guided by individualized goal plans which are reviewed and updated every six months</li> <li>* Provide opportunities during group sessions or outings for positive social interaction with other teen parents</li> <li>* Provide transportation as needed for education, childcare, and healthcare services</li> <li>* Make referrals as needed to counseling and/or other support services for sexual abuse or neglect in family of origin, sexual violence, dating/domestic violence, mental health, and substance abuse</li> <li>* Provide opportunities as appropriate for the father of the baby or the participant's current partner to participate in APP activities</li> <li>o Conduct visits to local grocery stores/food co-ops, and food banks to assess which healthy foods are available and best value for healthy food and affordable weekly budget</li> </ul>	<p>Improve knowledge of, belief in, and skills relevant to prenatal care and exercise</p> <p>Improve knowledge of, belief in, and skills relevant to the importance of good nutrition and folic acid in the prenatal period</p> <p>Improve knowledge of the signs and symptoms of preterm labor</p> <p>Improve knowledge of, belief in, and skills relevant to the prevention of harmful prenatal effects of violence, stress, smoking, substance abuse</p> <p>Increase support services or resources for meeting needs and dealing with challenges; improve ability to recognize when assistance is needed; improve knowledge of how to find and access support services or resources</p>	<p>Increase on-time receipt of appropriate prenatal care services</p> <p>Increase healthy eating and exercise as prescribed by a health professional</p> <p>Eliminate use of alcohol, tobacco, or other drugs while pregnant</p>	<p><b>Goal 2A:</b> Increase healthy births</p>

## Goal #2: Improve Developmental Outcomes for Children of APP Participants

Intervention Activities	Determinants	Behaviors	APP Goal
<ul style="list-style-type: none"> <li>• Provide at least four hours of interactive group instruction to include the following: 1) importance of positive parenting, appropriate disciplinary skills, and strategies that work for them; 2) mental health issues and maternal depression among teen parents including prevention and treatment of post-partum depression; 3) importance of age- and ability-appropriate infant and toddler play; 4) legal issues and the law related to child welfare; 5) their own stress points, emotions, and how to articulate what they need from others</li> <li>* Provide opportunities to practice positive parenting skills (behavior management, discipline, and play time) with APP Staff during home visits</li> <li>* Provide at least one 60-minute one-on-one session per month (12 per year with at least 4 in the home) with each participant to reinforce knowledge and skills gained during group instruction or provide make-up instruction if absent from group instruction</li> <li>* Provide ongoing case management services guided by individualized goal plans which are reviewed and updated every six months</li> <li>* Provide opportunities during group sessions or outings for positive social interaction with other teen parents</li> <li>* Provide transportation as needed for education, childcare, and healthcare services</li> <li>* Make referrals as needed to child care assistance programs or quality child care facilities</li> <li>* Make referrals as needed to counseling and/or other support services for sexual abuse or neglect in family of origin, sexual violence, dating/domestic violence, mental health, and substance abuse</li> <li>* Provide opportunities as appropriate for the father of the baby or the participant's current partner to participate in APP activities</li> <li>o Conduct bi-annual parent support groups for young parents where they can share, discuss, and brainstorm positive conflict resolution strategies that work for them</li> </ul>	<p>Improve positive parenting skills, parent-child attachment skills, and self-efficacy to use these skills</p> <p>Improve knowledge about mental health issues</p> <p>Improve knowledge of legal issues and the law</p> <p>Improve listening and communication skills and self-efficacy to use these skills</p> <p>Improve negotiation and conflict resolution skills and self-efficacy to use these skills</p> <p>Increase awareness of own child-rearing histories and understanding of own approach to parenting</p> <p>Improve healing, as appropriate, from depression, abuse and/or neglect, post-traumatic stress syndrome, multiple stressors</p> <p>Increase support services or resources for meeting needs and dealing with challenges; improve ability to recognize when assistance is needed; improve knowledge of how to find and access support services or resources</p>	<p>Increase use of good parenting skills</p>	<p><b>Goal 2B:</b> Increase incidence of appropriate discipline, of nurturing behavior, and of children who are well cared for</p>

## Goal #2: Improve Developmental Outcomes for Children of APP Participants

Intervention Activities	Determinants	Behaviors	APP Goal
<ul style="list-style-type: none"> <li>• Provide at least nine hours of interactive group instruction to include the following: 1) importance of breastfeeding and how to breastfeed; 2) first aid and certification in infant/child CPR; 3) the importance of medical check-ups, how to discuss concerns with a doctor, and when to call a doctor for injury or illness; 4) developmental milestones; 5) importance of using infant/toddler car seats, how to use them properly, and where the child seat check points are located in the community; 6) safe and developmentally appropriate playground use; 7) baby- and child-proofing and safety practices to prevent unintentional injury or poisoning; 8) how to prepare an emergency plan; 9) their own stress points, emotions, and how to articulate what they need from others (repeated from goal #2b); 10) how they are their child's primary, best teacher; 11) how to build a home library including provision of books and educational toys</li> <li>• Provide individual consultations with young mother about her capacity emotionally and physically to breastfeed</li> <li>• Implement a toy and book exchange program for teen parents to share toys and learn from one another the benefit of playtime with their children</li> <li>• Provide opportunities to observe APP Staff modeling positive interactions with babies/toddlers at group sessions and home visits</li> <li>* Provide opportunities to practice positive parenting skills (behavior management, discipline, and play time) with APP Staff during home visits</li> <li>* Provide at least one 60-minute one-on-one session per month (12 per year with at least 4 in the home) with each participant to reinforce knowledge and skills gained during group instruction or provide make-up instruction if absent from group instruction</li> <li>* Provide ongoing case management services guided by individualized goal plans which are reviewed and updated every six months</li> <li>* Provide opportunities during group sessions or outings for positive social interaction with other teen parents</li> <li>* Provide transportation as needed for education, childcare, and healthcare services</li> <li>* Make referrals as needed to child care assistance programs or quality child care facilities</li> <li>* Make referrals as needed for child developmental evaluations</li> <li>* Make referrals as needed to counseling and/or other support services for sexual abuse or neglect in family of origin, sexual violence, dating/domestic violence, mental health, and substance abuse</li> <li>* Provide opportunities as appropriate for the father of the baby or the participant's current partner to participate in APP activities               <ul style="list-style-type: none"> <li>○ Establish a connection with Motherhead, Inc., local library, and/or bookstore to provide age-appropriate literacy education for the child of the APP participant</li> <li>○ Conduct group outings to libraries, book mobiles, book fairs, story time at bookstores</li> </ul> </li> </ul>	<p>Improve knowledge of, belief in, and skills relevant to breastfeeding</p> <p>Improve knowledge and skills to provide first aid and CPR</p> <p>Improve knowledge of, belief in, and skills relevant to positive parenting, child development, and attachment</p> <p>Improve knowledge of, belief in, and skills relevant to parent-child activities that promote physical, emotional, cognitive, and social development of child</p> <p>Increase knowledge of and skills relevant to the use of car seats</p> <p>Increased knowledge of and skills relevant to preventing housing hazards for fetal/infant/child development</p> <p>Improve knowledge of, belief in, and skills relevant to the importance of family literacy</p> <p>Improve healing, as appropriate, from depression, abuse and/or neglect, post-traumatic stress syndrome, multiple stressors</p> <p>Increase support services or resources for meeting needs and dealing with challenges; improve ability to recognize when assistance is needed; improve knowledge of how to find and access support services or resources</p>	<p>Increase on-time receipt of appropriate health and child development services</p> <p>Increase positive attachment using an infant mental health approach</p> <p>Increase breast-feeding incidence and duration, as appropriate</p> <p>Increase the number of children who reach school age without accidental injury</p> <p>Increase incidence of family reading</p>	<p><b>Goal 2C:</b></p> <p>Increase age-appropriate physical, emotional, cognitive, and social development, including readiness for school success</p>



- 2-2. Describe specifically how the intervention activities of APP will be implemented (i.e., when, where, how many, how often, by whom). (10 points)**
- 2-3. Describe in detail project activities, other than those in the logic model, including planning and start-up activities, logistical issues, and incentive activities. Explain why you chose to add the additional activities and how will they address the unmet needs. (10 points)**
- 2-4. Describe how you intend to provide comprehensive sexuality education including complete and medically accurate information about contraceptive methods including abstinence; and referrals for family planning services. (5 points)**

# **Section 3**

## **Data Collection**

**Total Point Value:**

10

**Page Limit:**

1 single-spaced

- 3-1. Indicate that you have a computer (or plan to purchase one) and internet access that can be used to enter data into the TPPI Database. (2 points)**
- 3-2. Who will be responsible for: a) entering data into the database? and b) monitoring the database to ensure that data is being entered on a monthly basis? (2 points)**
- 3-3. Describe your plans for soliciting feedback from program participants, and how you will use this information for continuous quality improvement. (3 points)**
- 3-4. How will you ensure confidentiality of files containing personal information of participants? (3 points)**

# **Section 4**

## **Agency Ability**

**Total Point Value:**  
15

**Page Limit:**  
3 single-spaced

**4-1. Summarize your agency's mission, background, and services. (3 points)**

- Include the following in Attachment C: A list of your agency's Board of Directors; and the organizational chart of your agency. If new positions will be created with this grant award, explain where these positions will fit into the chart. **(1 point)**
- All applicants are required to include documentation of their tax identification number.
  - Public Agencies: Provide a copy of a letter from the IRS which documents your organization's tax identification number. The organization's name and address on the letter must match your current organization's name and address.
  - Private Non-profits: Provide a copy of an IRS determination letter which states that your organization has been granted exemption from federal income tax under section 501(c) (3) of the Internal Revenue Code. The organization's name and address on the letter must match your current organization's name and address.
  - In addition, those private non-profit agencies are to provide a completed, signed, and notarized page verifying continued existence of the agency's 501(c) (3) status. Verification form provided as part of Attachment C.

**4-2. Describe your agency's capacity to implement the Adolescent Parenting Program and administer the state grant funds if awarded. (5 points)**

**4-3. Describe the staff positions that are necessary to implement and support the project, including the amount of time to be spent on the project. (2 points)**

- Include in Attachment C job descriptions for all staff positions that are necessary to implement and support the project. The job descriptions should include key responsibilities, minimum qualifications, and salary range. **(2 points)**

**4-4. Summarize the background or experience of personnel in the key project positions. If staff are not currently in place, explain the process for recruiting and hiring them. (2 points)**

# Section 5

## Community Involvement

**Total Point Value:**  
15

**Page Limit:**  
3 single-spaced



- 5-1. Describe your efforts to establish or strengthen the membership of your Community Advisory Council (CAC). (1 point)**  
– Include in Attachment C a list of members of the CAC and include their affiliation. If there is not an existing CAC, provide a list of prospective members. **(1 point)**
- 5-2. Describe how the CAC has been or will be involved with the implementation of the project and with the development of this application. (3 points)**  
– Include in Attachment A letters of specific commitment from current or prospective CAC members from at least five agencies other than the applying agency indicating both their commitment to serve and the responsibilities they will assume as a member of the CAC. **(1 point)**
- 5-3. Describe the roles of other agencies that will be collaborating with your agency to implement the project. Indicate whether there are existing programs or services in the community that serve first time teen parents and describe how you will collaborate with them. Specifically address collaboration with your local county health department. (3 points)**  
– Include in Attachment A letters of specific commitment from all agencies integral to the implementation of the proposed activities. A letter from the local county health department must be included unless the applicant agency is the county health department. **(1 point)**
- 5-4. Where will you refer participants that have needs beyond the scope of your project such as contraception, sexual violence, dating/domestic violence, mental health, and substance abuse? (3 points)**  
– Include in Attachment A letters of specific commitment from all agencies who will accept referrals for these needs. **(1 point)**
- 5-5. Describe any general support from the community for the project. (1 point)**  
– Include in Attachment B letters of general support or any other documentation to show that there is community support for the application.

# Section 6

## Budget

**Total Point Value:**

15

**Page Limit:**

Not Applicable

Insert Budget & Justification Form

Applicants must complete the *Budget and Justification Form* for each of the 4 funding periods and include the 4 budgets as part of this section. The *Budget and Justification Form* will be provided at the mandated web-based technical assistance conference and e-mailed to applicants with the RFA. This budget requires a line item budget and justification for the initial funding period of 6/1/2013 through 5/31/2014; a budget and justification for the second funding period of 6/1/2014 through 5/31/2015; a budget and justification for the third funding period of 6/1/2015 through 5/31/2016; and budget and justification for the fourth funding period of 6/1/2016 through 5/31/2017. This budget and justification form will be sent to interested agencies along with this RFA and can be downloaded from the following website:

[www.teenpregnancy.ncdhhs.gov/funding.htm](http://www.teenpregnancy.ncdhhs.gov/funding.htm) beginning October 1, 2012.

If indirect costs are requested, a current indirect cost rate letter must be included with the applicant's budget. The proper documentation for indirect cost is either a copy of the indirect cost approval letter to the contractor from the cognizant federal agency, or a letter from an independent, certified public accountant that establishes this rate for the agency.

# **Attachment A**

## **Letters of Specific Commitment & Memoranda of Agreement**

This attachment must include letters of specific commitment from each of the following agencies or individuals:

- Any agency that the applicant will be relying on to successfully implement the Adolescent Parenting Program. Examples of such agencies include those that will provide financial support, meeting space, transportation, access to participants, or services to participants beyond the scope of the applicant.
- The local county health department. If the program will be implemented in more than one county, then a letter must be included from all applicable health departments. If the applicant is the county health department, then a letter of specific commitment is not needed.
- At least five current or prospective CAC members indicating both their commitment to serve and the responsibilities they will assume as a member of the CAC.

If the applicant will subcontract the direct program services to another agency or organization, a memorandum of agreement (MOA) between the applicant agency and the subcontracted agency must be included in this attachment. Applicants that wish to subcontract direct program services to another agency must consult TPPI staff about the specific circumstances of the subcontracting relationship prior to submitting an application. The MOA should clearly indicate the scope of the work to be subcontracted.

# **Attachment B**

## **Documentation of General Support and Letters of Support**

This attachment should include any of the following:

- Letters of general support from citizens and community agencies
- Statements in newspaper articles or minutes from public hearings showing community support for the application or for services for teen parents.
- Other evidence of general support from the community

# Attachment C

## Agency Information

This attachment must include each of the following:

- Organizational chart of the applying agency.
- List of current Board of Directors of the applying agency.
- List of current or prospective Community Advisory Council members.
- Job descriptions for all staff positions that are necessary to implement and support the project.
- All applicants are required to include documentation of their tax identification number.
  - Public Agencies: Provide a copy of a letter from the IRS which documents your organization's tax identification number. The organization's name and address on the letter must match your current organization's name and address.
  - Private Non-profits: Provide a copy of an IRS determination letter which states that your organization has been granted exemption from federal income tax under section 501(c) (3) of the Internal Revenue Code. The organization's name and address on the letter must match your current organization's name and address. In addition, those private non-profit agencies are to provide a completed, signed, and notarized page verifying continued existence of the agency's 501(c) (3) status. Verification form provided on the following page.

*(This Form Must be Printed on Agency Letterhead)*

## **Verification of 501 (C)(3) Status**

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We, the undersigned entity, hereby testify that the undersigned entity's 501 (c)(3) status, on file with the North Carolina Department of Health and Human Services, Division of Public Health, is still in effect.

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Name of Agency

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Signature of Chairman, Executive Director, or other authorized official

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Title of above signed authorized official

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

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Notary Signature and Seal

Notary's commission expires \_\_\_\_\_, 20 \_\_\_\_.

# **Appendix B**

## **TPPI Legislative Rules**

# TPPI Legislative Rules

**North Carolina General Statutes**  
**Chapter 130A: Public Health**  
**Article 5: Maternal and Child Health and Women's Health**  
**Part 6: Teen Pregnancy Prevention**

**§ 130A-131.15A. Department to establish program.**

- (a) The Department shall establish and administer Teen Pregnancy Prevention Initiatives. The Department shall establish initiatives for primary prevention, secondary prevention, and special projects.
- (b) The Commission shall adopt rules necessary to implement this section. The rules shall include a maximum annual funding level for initiatives and a requirement for local match.
- (c) Initiatives shall be funded in accordance with selection criteria established by the Commission. In funding initiatives, the Department shall target counties with the highest teen pregnancy rates, increasingly higher rates, high rates within demographic subgroups, or greatest need for parenting programs. Grants shall be awarded on an annual basis.
- (d) Initiatives shall be funded on a four-year funding cycle. The Department may end funding prior to the end of the four-year period if programmatic requirements and performance standards are not met. At the end of four years of funding, a local initiative shall be eligible to reapply for funding.
- (e) Administrative costs in implementing this section shall not exceed ten percent (10%) of the total funds administered pursuant to this section.
- (f) Programs are not required to provide a cash match for these funds; however, the Department may require an in-kind match.
- (g) The Department shall periodically evaluate the effectiveness of teen pregnancy prevention programs. (2001-424, s. 21.89(c).)

**North Carolina Administrative Code**  
**Title 10A – Health and Human Services**  
**Chapter 43 – Personal Health**  
**Section .0800 – Teen Pregnancy Prevention**

**10A NCAC 43A .0801 GENERAL**

- (a) The Teen Pregnancy Prevention Initiatives shall be administered by the Division of Public Health, 1915 Mail Service Center, Raleigh, North Carolina 27699-1915, (919) 733-7791.
- (b) The Division of Public Health shall take the following actions prior to the end of State Fiscal Year 2001-2002: All currently funded Teen Pregnancy Prevention Projects shall be notified that they have been assigned to one of four groups, based upon the date that their Teen Pregnancy Prevention funding was initiated. This grouping shall allow the Division to phase out, in an orderly manner, those projects funded under the former rules of operation. These projects shall be grouped as follows:
  - (1) Group one shall be informed that they have one year of funding remaining. Projects in this group may file competitive applications for re-funding in the fall of 2002 for grants beginning on July 1, 2003.
  - (2) Group two shall be informed that they have two years of funding remaining. Projects in this group may file competitive applications for re-funding in the fall of 2003 for grants beginning on July 1, 2004.
  - (3) Group three shall be informed that they have three years of funding remaining. Projects in this group may file competitive applications for re-funding in the fall of 2004 for grants beginning on July 1, 2005.
  - (4) Group four shall be informed that they have four years of funding remaining. Projects in this group may file competitive applications for re-funding in the fall of 2005 for grants beginning on July 1, 2006.



(c) Notwithstanding Paragraph (b) of this Rule, Adolescent Parenting Program Projects that were approved for funding prior to December 1, 2001 shall receive their annually decreasing funding amount until the end of the original five-year agreement. These projects shall be placed in the groups described in Paragraph (b) of this Rule according to the years remaining on their original agreements. Any existing project that decides to forgo its remaining years of APP funding and to submit an application for stable funding under the revised program rules, may do so only after submission of a notice of voluntary program termination no later than six months prior to the start of the next fiscal year.

*History Note: Authority G.S. 130A-124; 130A-131.15A; S.L. 1989, c. 752, s. 136;  
Eff. August 1, 1990;  
Temporary Amendment Eff. December 1, 2001;  
Temporary Amendment Expired September 13, 2002;  
Amended Eff. April 1, 2003.*

#### **10A NCAC 43A .0802 DEFINITIONS**

The following definitions shall apply throughout this Subchapter:

- (1) "TPPI" means the Teen Pregnancy Prevention Initiatives which covers the Adolescent Parenting Program and Adolescent Parenting Program administered by the Division of Public Health.
- (2) "DPH" means the Division of Public Health, 1915 Mail Service Center, Raleigh, North Carolina 27699-1915.
- (3) "Contractor" means a county or district health department or department of social services or other public or private agency receiving Teen Pregnancy Prevention Initiatives funding.
- (4) "Adolescent" means any individual 19 years of age and under.
- (5) "Major Equipment" means any fixed asset that has a unit cost of two thousand dollars (\$2,000) or more.
- (6) "Minor Remodeling" means any building or facility reconstruction project having a total cost of two thousand dollars (\$2,000) or less.
- (7) "Primary pregnancy prevention" means prevention of first pregnancy.
- (8) "Department" means the Department of Health and Human Services.
- (9) "The Commission" means the Commission for Public Health.
- (10) "Secondary pregnancy prevention" means prevention of second and higher order pregnancies.

*History Note: Authority G.S. 130A-124; 130A-131.15A;  
Eff. August 1, 1990;  
Amended Eff. January 4, 1994;  
Temporary Amendment Eff. December 1, 2001;  
Temporary Amendment Expired September 13, 2002;  
Amended Eff. April 1, 2003.*

#### **10A NCAC 43A .0803 GRANT APPLICATIONS**

- (a) All programs receiving TPPI grants shall demonstrate through a competitive application process that their proposed strategies reflect best practice models for teen pregnancy prevention and strong collaboration of local agencies within their communities. Community agencies in counties ranking in the top quartile relative to pregnancy rates among girls aged 15 to 19 shall receive requests for application (RFAs) 30 days prior to the mailing to agencies in other counties. All community agencies that apply for this funding shall receive technical assistance. Individual consultations with those counties receiving the RFA earlier due to their teen pregnancy rankings shall have access to technical assistance from staff of the Division of Public Health for 45 additional days.
- (b) Grants shall be awarded through a request for applications (RFA) process that includes notification of potential applicant agencies of the eligibility criteria and requirements for funding.
- (c) Any local agency or combination of agencies and agencies may apply to the DPH for an allocation of money to operate a project aimed at preventing primary or secondary adolescent pregnancy.
- (d) The application shall contain an analysis of adolescent pregnancy and related problems in the locality the project would serve, and a description of how the funded project would attempt to prevent the problems.
- (e) The application shall state how much money is needed to operate the project and how the money shall be spent.

(f) The Department shall conduct annually a pre-application conference that shall be attended by a representative of any agency that wishes to apply for funding; that session shall define the criteria for accountability and evaluation that the Department requires of grantees. That session shall also provide information about additional funding sources to which agencies might turn.

(g) Application Requirements – The Department shall apply the following standards to agencies applying for first-year funding:

- (1) Each agency shall have a plan of action that extends throughout their funding cycle.
- (2) Each agency shall have realistic, specific, and measurable goals and objectives for the prevention of adolescent pregnancy.
- (3) Each agency, before submitting its application, shall send a representative to the pre-application conference held by the Department.

*History Note: Authority G.S. 130A-124; 130A-131.15A;  
Eff. August 1, 1990;  
Amended Eff. January 4, 1994; August 1, 1991;  
Temporary Amendment Eff. December 1, 2001;  
Temporary Amendment Expired September 13, 2002;  
Amended Eff. August 1, 2004; April 1, 2003.*

#### **10A NCAC 43A .0804 MAXIMUM FUNDING LEVEL**

The maximum level of funding for any one project shall be:

- (1) Fifty thousand dollars (\$50,000), provided that local participants contribute a minimum of ten thousand dollars (\$10,000) in-kind match annually.
- (2) Sixty-five thousand dollars (\$65,000), provided that local participants contribute a minimum of eighteen thousand dollars (\$18,000) in-kind match annually and that active leadership or financial support is annually demonstrated from at least three of the following groups:
  - (a) local public school system;
  - (b) public and private health care providers;
  - (c) local social services department;
  - (d) local mental health authority;
  - (e) local Workforce Board; or
  - (f) corporations and businesses.
- (3) Seventy-five thousand dollars (\$75,000), provided that local participants contribute a minimum of twenty-five thousand dollars (\$25,000) in-kind match annually and:
  - (a) that active leadership or financial support is annually demonstrated from at least four of the following groups:
    - (i) local public school system;
    - (ii) public and private health care providers;
    - (iii) local social services department;
    - (iv) local mental health authority;
    - (v) local Workforce Board; or
    - (vi) corporations and businesses; and
  - (b) that the population to be served participants in the TPPI projects are linked with:
    - (i) academic support programs such as Communities in Schools (CIS) or Save Our Students (SOS);
    - (ii) health related programs such as physical fitness and nutrition related activities;
    - (iii) child care, economic assistance, and other social services programs;
    - (iv) counseling or other therapeutic services;
    - (v) career counseling and job shadowing using such programs as the local JobLink Center; or
    - (vi) mentoring by local businesses or agencies.

*History Note: Authority G.S. 130A-124; 130A-131.15A;  
Eff. August 1, 1990;  
Amended Eff. January 4, 1994;  
Temporary Amendment Eff. December 1, 2001;*

**10A NCAC 43A .0805 OPERATING STANDARDS**

- (a) Upon approval of an application for grant funds a budget shall be negotiated and a contract shall be signed between the Contractor and the DPH.
- (b) Project funds shall be used solely for the purposes detailed in the approved application and budget.
- (c) Contractors shall not use TPPI funds for purposes that are prohibited by statute, or for the following purposes:
  - (1) purchase of inpatient care;
  - (2) purchase or improvement of land;
  - (3) purchase, construction, or permanent improvement (other than minor remodeling) of any building or other facility;
  - (4) purchase or prescriptions of contraceptives;
  - (5) transportation to or from abortion services; or
  - (6) abortions.
- (d) TPPI projects shall not impose charges on clients for services.
- (e) Staff qualifications, training, and experiences shall be appropriate for implementing project activities.
- (f) Each project shall participate in the annual training conference with state staff and other project staff.
- (g) The start-up period before project activities are implemented shall not exceed six months.
- (h) Each project shall obtain approval from the DPH prior to making changes in program goals, objectives, and population to be served. The Division of Public Health shall only approve changes that are consistent with the rules of this section.
- (i) Each project shall have an advisory group composed of members both within and outside the sponsoring agency of the project. These groups shall meet at least quarterly and advise project staff on project policies and operations.
- (j) Each project shall define and maintain cooperative ties with other community institutions.
- (k) Each project shall demonstrate its ability to attract financial support from sources other than the State, including sources in the local community.

*History Note: Authority G.S. 130A-124; 130A-131.15A; S.L. 1989, c. 752, s. 136;  
Eff. August 1, 1990;  
Amended Eff. July 1, 1992;  
Temporary Amendment Eff. December 1, 2001;  
Temporary Amendment Expired September 13, 2002;  
Amended Eff. April 1, 2003.*

**10A NCAC 43A .0806 EVALUATION AND MONITORING**

- (a) The DPH shall make site reviews of Contractors to assess program performance.
- (b) The DPH shall make periodic site visits to contractors to provide technical assistance and consultation.

*History Note: Authority G.S. 130A-124; 130A-131.15A; S.L. 1989, c. 752, s. 136;  
Eff. August 1, 1990;  
Temporary Amendment Eff. December 1, 2001;  
Temporary Amendment Expired September 13, 2002;  
Amended Eff. April 1, 2003.*

**10A NCAC 43A .0807 RENEWAL OF GRANT FUNDS**

- (a) Contracts for TPPI projects are subject to annual renewal for a four year period based upon criteria established by the program and contingent upon the availability of funds for this purpose.
- (b) A contractor that violates any of the provisions of these rules may have TPPI funding reduced or discontinued. The Department shall make the final decision to reduce or discontinue funding based upon the advice of the Commission.

*History Note: Authority G.S. 130A-124; 130A-131.15A; S.L. 1989, c. 752, s. 136;  
Eff. August 1, 1990;  
Temporary Amendment Eff. December 1, 2001;*

**10A NCAC 43A .0808 CRITERIA FOR PROJECT SELECTION**

(a) The Department shall present funding recommendations to the Commission from among the applicants that meet the minimum standards in Rule .0803 of this Subchapter. A multi-disciplinary committee of public and private health and human services providers who are familiar with adolescent health issues shall review applications based upon the criteria set out below. Recommendations shall also be based upon the best selection of projects according to the following criteria:

- (1) Degree of need of the locality, including that the service area has a significant adolescent pregnancy problem as evidenced by its adolescent pregnancy rate, adolescent birth rate, attributable risk score, and percentage of repeat adolescent births;
- (2) Evidence of selection of a program model that has documented success in the prevention of teen pregnancy;
- (3) A plan to provide comprehensive sexuality education including complete and medically accurate information about contraceptive methods including abstinence to all participants.
- (4) A plan to refer teens who have needs beyond the scope of the program including substance abuse, domestic violence, family planning, and mental health, to an appropriate provider.
- (5) A statewide program evaluation plan that addresses the administration of pre-tests and post-tests that measure participants' knowledge, attitudes and behaviors as compared to a control group; and submission of data in an internet based database;
- (6) Adequacy of agency and staff to meet project objectives;
- (7) Level of community support. There shall be documentation such as letters or statements of commitment from partnering agencies to show strong support for the application;
- (8) Evidence that the proposed budget does not exceed the costs of the planned program activities; and
- (9) Demonstration by existing or formerly TPPI-grantees that they have provided an effective intervention for reducing adolescent pregnancy rates among their participants.

(b) The Commission shall provide input regarding the proposed funding decisions made by the Department. The Department shall consider the input of the Commission, but is not bound by it. By June 1 of each year the Department shall notify the projects that are to be funded.

*History Note: Authority G.S. 130A-124; 130A-131.15A;  
Temporary Adoption Eff. December 1, 2001;  
Temporary Adoption Expired September 13, 2002;  
Eff. April 1, 2003;  
Amended Eff. April 1, 2008; August 1, 2004.*

# Appendix C

## Application Consultation Schedule

## Application Consultation Schedule

Inquiries about this RFA are encouraged, and may be directed to the TPPI staff at [SVC\\_DHHS.tppi-rfa@dhhs.nc.gov](mailto:SVC_DHHS.tppi-rfa@dhhs.nc.gov) or (919)707-5700. Applicants from targeted counties may receive consultation from TPPI staff upon receipt of the RFA. Applicants from all other counties are eligible for consultation following the web-based technical assistance conference on October 15, 2012.

The regional meetings below have been reserved for individual, face-to-face appointments with interested applicants. To schedule an appointment at one of the regional sites, applicants should contact the appropriate TPPI Program Consultant.

Consultation to all applicants by DHHS staff shall cease on November 9, 2012. Applicants may receive assistance from the Adolescent Pregnancy Prevention Campaign of North Carolina, [www.appcnc.org](http://www.appcnc.org), 919-226-1880, until November 16, 2012.

Site and Date	TPPI Program Consultant (call to schedule meeting)
<b>Hickory</b> Catawba County Health Department. 3070 11th Ave Drive SE <b>Tuesday, October 23, 2012</b>	<b>Valerie Meadows Sims</b> <a href="mailto:valerie.sims@dhhs.nc.gov">valerie.sims@dhhs.nc.gov</a> Office: (919) 707-5686 Mobile: (919) 612-1448
<b>Greensboro</b> Guilford County Department of Public Health 1100 E. Wendover Ave <b>Tuesday, October 23, 2012</b>	<b>Cynthia Seale-Rivera</b> <a href="mailto:cynthia.rivera@dhhs.nc.gov">cynthia.rivera@dhhs.nc.gov</a> Office: (919) 707-5718 Mobile: (919) 675-7444
<b>Fayetteville</b> Cumberland County Health Department 1235 Ramsey Street Fayetteville, NC 28301 <b>Wednesday, October 24, 2012</b>	<b>Audrey Loper</b> <a href="mailto:audrey.loper@dhhs.nc.gov">audrey.loper@dhhs.nc.gov</a> Office: (919) 707-5688 Mobile: (919) 605-1678
<b>Greenville</b> NCDHHS Eastern Regional Office 404 St Andrews Dr <b>Thursday October 25, 2012</b>	<b>Sydney Atkinson</b> <a href="mailto:Sydney.atkinson@dhhs.nc.gov">Sydney.atkinson@dhhs.nc.gov</a> Office: (919) 707-5693 Mobile: (919) 218-3921

# Appendix D

## Forms for Reference

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Applicants are **not to complete** these documents at this time **nor return them** with the RFA response. They are for reference only.

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## **FEDERAL CERTIFICATIONS**

### **The undersigned states that:**

1. He or she is the duly authorized representative of the Contractor named below;
2. He or she is authorized to make, and does hereby make, the following certifications on behalf of the Contractor, as set out herein:
  - a. The Certification Regarding Nondiscrimination;
  - b. The Certification Regarding Drug-Free Workplace Requirements;
  - c. The Certification Regarding Environmental Tobacco Smoke;
  - d. The Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion Lower Tier Covered Transactions; and
  - e. The Certification Regarding Lobbying;
3. He or she has completed the Certification Regarding Drug-Free Workplace Requirements by providing the addresses at which the contract work will be performed;
4. [Check the applicable statement]

☐ He or she **has completed** the referenced **Disclosure of Lobbying Activities** because the Contractor **has made**, or **has an agreement to make**, a payment to a lobbying entity for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered Federal action

OR

☐ He or she **has not completed** the referenced **Disclosure of Lobbying Activities** because the Contractor **has not made**, and **has no agreement to make**, any payment to any lobbying entity for influencing or attempting to influence any officer or employee of any agency, any Member of Congress, any officer or employee of Congress, or any employee of a Member of Congress in connection with a covered Federal action.

5. The Contractor shall require its subcontractors, if any, to make the same certifications and disclosure.

Reference only — Not for signature

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Signature

Title

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Contracting Agency's Legal Name

Date

**[This Certification must be signed by the same individual who signed the Contract.]**

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### **I. Certification Regarding Nondiscrimination**

**The Contractor certifies** that it will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or



financing of housing; (h) the Food Stamp Act and USDA policy, which prohibit discrimination on the basis of religion and political beliefs; and (i) the requirements of any other nondiscrimination statutes which may apply to this Agreement.

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## II. Certification Regarding Drug-Free Workplace Requirements

1. The Contractor certifies that it will provide a drug-free workplace by:
  - A. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the Contractor's workplace and specifying the actions that will be taken against employees for violation of such prohibition;
  - B. Establishing a drug-free awareness program to inform employees about:
    - (1) The dangers of drug abuse in the workplace;
    - (2) The Contractor's policy of maintaining a drug-free workplace;
    - (3) Any available drug counseling, rehabilitation, and employee assistance programs; and
    - (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;
  - C. Making it a requirement that each employee be engaged in the performance of the agreement be given a copy of the statement required by paragraph A;
  - D. Notifying the employee in the statement required by paragraph A that, as a condition of employment under the agreement, the employee will:
    - (1) Abide by the terms of the statement; and
    - (2) Notify the employer of any criminal drug statute conviction for a violation occurring in the workplace no later than five days after such conviction;
  - E. Notifying the Department within ten days after receiving notice under subparagraph D(2) from an employee or otherwise receiving actual notice of such conviction;
  - F. Taking one of the following actions, within 30 days of receiving notice under subparagraph D(2), with respect to any employee who is so convicted:
    - (1) taking appropriate personnel action against such an employee, up to and including termination; or
    - (2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency; and
  - G. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs A, B, C, D, E and F.
2. The sites for the performance of work done in connection with the specific agreement are listed below (list all sites; add additional pages if necessary):

Street Address No. 1:

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City, State, Zip Code:

Street Address No. 2:

City, State, Zip Code:

3. Contractor will inform the Department of any additional sites for performance of work under this agreement.
4. False certification or violation of the certification may be grounds for suspension of payment, suspension or termination of grants, or government-wide Federal suspension or debarment. 45 C.F.R. 82.510.

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### III. Certification Regarding Environmental Tobacco Smoke

Public Law 103-227, Part C-Environmental Tobacco Smoke, also known as the Pro-Children Act of 1994 (Act), requires that smoking not be permitted in any portion of any indoor facility owned or leased or contracted for by an entity and used routinely or regularly for the provision of health, day care, education, or library services to children under the age of 18, if the services are funded by Federal programs either directly or through State or local governments, by Federal grant, contract, loan, or loan guarantee. The law does not apply to children's services provided in private residences, facilities funded solely by Medicare or Medicaid funds, and portions of facilities used for inpatient drug or alcohol treatment. Failure to comply with the provisions of the law may result in the imposition of a civil monetary penalty of up to \$1,000.00 per day and/or the imposition of an administrative compliance order on the responsible entity.

**The Contractor certifies** that it will comply with the requirements of the Act. The Contractor further agrees that it will require the language of this certification be included in any subawards that contain provisions for children's services and that all subgrantees shall certify accordingly.

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### IV. Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion Lower Tier Covered Transactions

#### Instructions

[The phrase "prospective lower tier participant" means the Contractor.]

1. By signing and submitting this document, the prospective lower tier participant is providing the certification set out below.
2. The certification in this clause is a material representation of the fact upon which reliance was placed when this transaction was entered into. If it is later determined that the prospective lower tier participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, the department or agency with which this transaction originate may pursue available remedies, including suspension and/or debarment.
3. The prospective lower tier participant will provide immediate written notice to the person to whom this proposal is submitted if at any time the prospective lower tier participant learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.
4. The terms "covered transaction," "debarred," "suspended," "ineligible," "lower tier covered transaction," "participant," "person," "primary covered transaction," "principal," "proposal," and "voluntarily excluded," as used in this clause, have the meanings set

out in the Definitions and Coverage sections of rules implementing Executive Order 12549, 45 CFR Part 76. You may contact the person to whom this proposal is submitted for assistance in obtaining a copy of those regulations.

5. The prospective lower tier participant agrees by submitting this proposal that, should the proposed covered transaction be entered into, it shall not knowingly enter any lower tier covered transaction with a person who is debarred, suspended, determined ineligible or voluntarily excluded from participation in this covered transaction unless authorized by the department or agency with which this transaction originated.
6. The prospective lower tier participant further agrees by submitting this document that it will include the clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion--Lower Tier Covered Transaction," without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.
7. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not debarred, suspended, ineligible, or voluntarily excluded from covered transaction, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the Nonprocurement List.
8. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.
9. Except for transactions authorized in paragraph 5 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the department or agency with which this transaction originated may pursue available remedies, including suspension, and/or debarment.

#### **Certification**

- a. **The prospective lower tier participant certifies**, by submission of this document, that neither it nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency.
- b. Where the prospective lower tier participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

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#### **V. Certification Regarding Lobbying**

**The Contractor certifies**, to the best of his or her knowledge and belief, that:

1. No Federal appropriated funds have been paid or will be paid by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
2. If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federally funded contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form SF-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions. Standard Form SF-LLL and its instructions are located at the following URL:  
<http://www.whitehouse.gov/omb/assets/omb/grants/sflllin.pdf>
3. The undersigned shall require that the language of this certification be included in the award document for subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) who receive federal funds of \$100,000.00 or more and that all subrecipients shall certify and disclose accordingly.

4. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000.00 and not more than \$100,000.00 for each such failure.

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## LETTER TO IDENTIFY INDIVIDUALS TO SIGN CONTRACTS

### **Letter from Board President/Chairperson Identifying Individuals as Authorized to Sign Contracts**

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I, \_\_\_\_\_, Board President/Chairperson of  
\_\_\_\_\_ [Agency/Organization's legal name] hereby identify  
the following individual(s) who is (are) authorized to sign **Contracts** for the organization named above:

Printed Name	Title
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____

Reference only — Not for signature

Signature	* Title	Date
* <i>Indicate if you are the Board President or Chairperson</i>		

The fiscal year of the above named agency runs from months \_\_\_\_\_ to \_\_\_\_\_.

## LETTER TO IDENTIFY INDIVIDUALS TO SIGN EXPENDITURE REPORTS

### **Letter from Board President/Chairperson Identifying Individuals as Authorized to Sign Contract Expenditure Reports**

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I, \_\_\_\_\_, Board President/Chairperson of  
\_\_\_\_\_ [Organization's legal name] hereby identify the  
following individual(s) who is (are) authorized to sign **Contract Expenditure Reports** for the  
organization/agency named above:

Printed Name	Title	Signature
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____

Reference only — Not for signature

_____ Signature	_____ * Title	_____ Date
	* <i>Indicate if you are the Board President or Chairperson</i>	

## **NOTARIZED STATEMENT AND CONFLICT OF INTEREST POLICY**

### **Notarization of Conflict of Interest Policy**

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State of North Carolina, County of \_\_\_\_\_

I, \_\_\_\_\_, Notary Public for said County and State, certify that  
\_\_\_\_\_  
[Name of Board Chair or Authorized Official] personally  
appeared before me this day and acknowledged that he/she is  
\_\_\_\_\_  
[Title] of  
\_\_\_\_\_  
[Organization's full legal name] and by  
that authority duly given and as the act of the Organization, affirmed that the foregoing Conflict of Interest  
Policy was adopted by the Board of Directors/Trustees or other governing body in a meeting held on the \_\_\_\_  
day of \_\_\_\_\_, \_\_\_\_\_.

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Notary Signature and Seal

Notary's commission expires \_\_\_\_\_, 20 \_\_\_\_.

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#### ***Instruction for Organization:***

Sign below and attach the organization's Conflict of Interest Policy which is referenced above.

Reference only — Not for signature

\_\_\_\_\_  
Signature of above named Organization Official

## Conflict of Interest Policy

The Board of Directors/Trustees or other governing persons, officers, employees or agents are to avoid any conflict of interest, even the appearance of a conflict of interest. The Organization's Board of Directors/Trustees or other governing body, officers, staff and agents are obligated to always act in the best interest of the organization. This obligation requires that any Board member or other governing person, officer, employee or agent, in the performance of Organization duties, seek only the furtherance of the Organization mission. At all times, Board members or other governing persons, officers, employees or agents, are prohibited from using their job title, the Organization's name or property, for private profit or benefit.

A. The Board members or other governing persons, officers, employees, or agents of the Organization should neither solicit nor accept gratuities, favors, or anything of monetary value from current or potential contractors/vendors, persons receiving benefits from the Organization or persons who may benefit from the actions of any Board member or other governing person, officer, employee or agent. This is not intended to preclude bona-fide Organization fund raising-activities.

B. A Board or other governing body member may, with the approval of Board or other governing body, receive honoraria for lectures and other such activities while not acting in any official capacity for the Organization. Officers may, with the approval of the Board or other governing body, receive honoraria for lectures and other such activities while on personal days, compensatory time, annual leave, or leave without pay. Employees may, with the prior written approval of their supervisor, receive honoraria for lectures and other such activities while on personal days, compensatory time, annual leave, or leave without pay. If a Board or other governing body member, officer, employee or agent is acting in any official capacity, honoraria received in connection with activities relating to the Organization are to be paid to the Organization.

C. No Board member or other governing person, officer, employee, or agent of the Organization shall participate in the selection, award, or administration of a purchase or contract with a vendor where, to his knowledge, any of the following has a financial interest in that purchase or contract:

1. The Board member or other governing person, officer, employee, or agent;
2. Any member of their family by whole or half blood, step or personal relationship or relative-in-law;
3. An organization in which any of the above is an officer, director, or employee;
4. A person or organization with whom any of the above individuals is negotiating or has any arrangement concerning prospective employment or contracts.

D. **Duty to Disclosure** — Any conflict of interest, potential conflict of interest, or the appearance of a conflict of interest is to be reported to the Board or other governing body or one's supervisor immediately.

E. **Board Action** — When a conflict of interest is relevant to a matter requiring action by the Board of Directors/Trustees or other governing body, the Board member or other governing person, officer, employee, or agent (person(s)) must disclose the existence of the conflict of interest and be given the opportunity to disclose all material facts to the Board and members of committees with governing board delegated powers considering the possible conflict of interest. After disclosure of all material facts, and after any discussion with the person, he/she shall leave the governing board or committee meeting while the determination of a conflict of interest is discussed and voted upon. The remaining board or committee members shall decide if a conflict of interest exists.

In addition, the person(s) shall not participate in the final deliberation or decision regarding the matter under consideration and shall leave the meeting during the discussion of and vote of the Board of Directors/Trustees or other governing body.



F. **Violations of the Conflicts of Interest Policy** — If the Board of Directors/Trustees or other governing body has reasonable cause to believe a member, officer, employee or agent has failed to disclose actual or possible conflicts of interest, it shall inform the person of the basis for such belief and afford the person an opportunity to explain the alleged failure to disclose. If, after hearing the person's response and after making further investigation as warranted by the circumstances, the Board of Directors/Trustees or other governing body determines the member, officer, employee or agent has failed to disclose an actual or possible conflict of interest, it shall take appropriate disciplinary and corrective action.

G. **Record of Conflict** — The minutes of the governing board and all committees with board delegated powers shall contain:

1. The names of the persons who disclosed or otherwise were found to have an actual or possible conflict of interest, the nature of the conflict of interest, any action taken to determine whether a conflict of interest was present, and the governing board's or committee's decision as to whether a conflict of interest in fact existed.
2. The names of the persons who were present for discussions and votes relating to the transaction or arrangement that presents a possible conflict of interest, the content of the discussion, including any alternatives to the transaction or arrangement, and a record of any votes taken in connection with the proceedings.

Approved by:

Reference only — Not for signature

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Legal Name of Organization

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Signature of Organization Official

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Title of Organization Official

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Date

## **NO OVERDUE TAX DEBTS CERTIFICATION**

### State Grant Certification – No Overdue Tax Debts<sup>1</sup>

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To: State Agency Head and Chief Fiscal Officer

#### **Certification:**

We certify that the \_\_\_\_\_ [Organization's full legal name] does not have any overdue tax debts, as defined by **N.C.G.S. 105-243.1**, at the federal, State, or local level. We further understand that any person who makes a false statement in violation of **N.C.G.S. 143C-6-23(c)** is guilty of a criminal offense punishable as provided by **N.C.G.S. 143-34(b)**.

#### **Sworn Statement:**

\_\_\_\_\_ [Name of Board Chair] and  
\_\_\_\_\_ [Name of Second Authorizing Official] being duly sworn, say that we are the Board Chair and \_\_\_\_\_ [Title of Second Authorizing Official], respectively, of \_\_\_\_\_  
[Agency/Organization's full legal name] of \_\_\_\_\_ [City] in the State of \_\_\_\_\_ [State]; and that the foregoing certification is true, accurate and complete to the best of our knowledge and was made and subscribed by us. We also acknowledge and understand that any misuse of State funds will be reported to the appropriate authorities for further action.

Reference only — Not for  
signature

Board Chair

Reference only — Not for  
signature

Title

Date

Signature

Title of Second Authorizing Official

Date

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

Reference only — Not for signature

Notary Signature and Seal

Notary's commission expires \_\_\_\_\_, 20\_\_.

<sup>1</sup> G.S. 105-243.1 defines: "Overdue tax debt – Any part of a tax debt that remains unpaid 90 days or more after the notice of final assessment was mailed to the taxpayer. The term does not include a tax debt, however, if the taxpayer entered into an installment agreement for the tax debt under G.S. 105-237 within 90 days after the notice of final assessment was mailed and has not failed to make any payments due under the installment agreement."